

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-876)

SERIAL NO. 9/523455
APPLICANT(S)

10/25/01

4/1/03

CLAIMS

AS FILED	AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1		1			
2						
3	1					
4	1		1			
5	1		1			
6	1		1			
7	1		1			
8	1		1			
9	1		1			
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TOTAL IND.	1		1			
TOTAL DEP.	22	22	21	21		
TOTAL CLAIMS	23		22			

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TOTAL CLAIMS			